

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

1. Name of person or entity receiving contribution or loan: **Nita Lowey for Congress**

2. Address: **PO Box 271**

3. City, State, and ZIP Code: **White Plains NY 10605**

4. Name of contributor: **Nita M. Lowey**

5. Office/State/County: **NY CD18**

6. Total amount received: **124273**

7. If contribution is for a candidate, list the name of the candidate and the office sought. If contribution is for a committee, list the name of the committee and the office sought. If contribution is for a party, list the name of the party and the office sought.

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount
NEA - NY Nat'l Education Assoc. 201 16th Street NW Washington, DC 20005		10/29/96	\$2000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount

8. Signature (print name)

9. Date

For further information contact:
Federal Election Commission
400 E Street, NE, Washington, DC 20002
Tel: 202-453-3232, 1-800-424-9549

FEC FORM 6
(11/95)

Federal Election Commission
ENVELOPE REPLACEMENT PAGE
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PREPARER

n/a

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n/a